

2015 PAYER DATA REPORTING TAG MEETING

TOTAL MEDICAL EXPENSES (TME)
ALTERNATIVE PAYMENT METHODS (APM)
RELATIVE PRICES (RP)

March 12, 2015



center
for health
information
and analysis

Payer Filing Schedule - UPDATE

File Type	File	Deadline
TME	CY 2013 Final TME	May 1, 2015
	CY 2014 Preliminary TME	May 1, 2015
APM	CY 2014 APM	May 15, 2015
RP	CY 2014 Hospital Relative Price	June 1, 2015
	CY 2013 Physician Group Relative Price	June 1, 2015
	CY 2014 Other Provider Relative Price	June 1, 2015
PPM	CY 2014 Provider Payment Methods	Postponed*
NADA	CY 2014 RP Network Average Dollar Amount	Postponed*

*For more information, please see *Administrative Bulletin 15-03; 957 CMR 2.00: Payer Data Reporting* available at: <http://chiamass.gov/assets/docs/g/chia-ab/1503.pdf>.

TME Updates

- Report data for all insurance categories for which you have business, even if those categories do not meet the member-months threshold.
- A payer's Health Status Adjustment (H.S.A.) tool and version must be the same for all files submitted in a given reporting year (e.g., CY 2013 Final TME and CY 2014 Preliminary TME filed in 2015).
- For preliminary TME, payers shall allow for a claims run-out period of at least 60 days after December 31st of the prior Calendar Year.
- Payers should apply incurred-but-not-reported (IBNR) factors to preliminary TME data for each type of TME service category.

TME Updates (cont.)

- Report Product Type Code in field ZR003 (instead of PCP Indicator).

Product Type Code	Definition
1	HMO and POS
2	PPO
3	Indemnity
4	Other (e.g. EPO)

TME: Completion Factors

- IBNR (Incurred but not Reported) factors need to be applied to CY 2014 Preliminary TME in the submitted TME file through INET.
- The IBNRs should be applied to represent 100% completion.
- CHIA will send a separate Excel sheet, where payers will indicate the actual claims run-out period and IBNRs for each service category.
Note: TME file will contain IBNR-adjusted payment amounts.
- The payer's CFO will sign a CHIA-issued certification form for the IBNR filing.

RP Updates

- File deadline changed from May 15th to June 1st.
- Calculation of product mix values (see DSM p. 5):
 - Last year's DSM stated that product mix values equaled "the percentage of total payments (claims and non-claims) to a provider attributed to each product type."
 - In fact, only hospital inpatient product mixes include non-claims payments. For hospital outpatient, physician group and other provider files, only claims payments are used in this calculation.

APM Updates

- H.S.A. score should not be normalized.
- Reminder: Stand alone Medicare Part D Prescription Drug Plan members and payments should not be reported in the data.
- Patient-Centered Medical Home (PCMH) member months and total payments should be reported uniquely in the “Other, non-fee-for-service” category, not as a subset of another category.

APM Updates (cont.)

- Global partial member months and payments:
 - In previous data collection rounds, payers were instructed to report global partial (payment method 1B) member months and payments as a subset of the global full payment method (1A), such that global partial member months and payments were reported twice (once as part of global full and again, separately, as global partial).
 - This year, payers are asked to report global partial payments and member months uniquely (i.e. they should not be included in 1A). The sum of 1A and 1B should equal total global payment method member months and payments.

APM Updates (cont.)

- The HPC, AGO and CHIA are interested in examining the nature of risk in global payment contracts
 - Upside-only
 - Two-sided (upside and downside)
- CHIA is currently considering how best to collect this data – more information to follow in coming weeks

Reminder: Use only CHIA-issued Organization IDs (OrgIDs)

- Please use only CHIA-assigned OrgIDs. No internal payer IDs will be accepted.
- If you contract with an organization for which no OrgID is defined, please email your CHIA contact with the organization name and address, and we will create one for you.
- Note that mapping of parent and local physician group relationships on CHIA's website is intended as a guide only. Payers should report physician group data based on their individual contracting structures with providers.
- Note: Organizational NPIs have been removed from the CHIA Uniform Provider OrgID list. CHIA will continue to explore the quality of NPI data, to improve OrgID mapping in the future.

Other Notes

- CHIA recommends compiling TME and APM files from the same cut of data.
- Insurance category label update: Dual-eligibles, 21-64 was incorrectly labeled 18-64. This has been fixed (Insurance category 7 for TME and APM; insurance category 6 for RP).

Data QA

- We will be sharing a Data Quality Checklist that payers are encouraged to complete before or immediately following data submission.
- This Checklist is similar to the TME-APM summary tables provided via email during last year's data submission process.
- It is intended to streamline data collection by identifying data inconsistencies early in the process, hopefully resulting in fewer data file resubmissions.

Next Steps: Updated Materials

- CHIA will disseminate the following updated reference materials:
 - Data Specification Manuals (DSMs) – TME, APM, RP
 - Uniform Provider List (OrgIDs)
 - RP sample calculation
 - RP HOS file layout guide (NEW)
 - Data QA Checklist (NEW)

Next Steps: INET

- First-time TME, APM and RP data submitters will need to complete INET registration.
 - Links to registration forms:
<http://chiamass.gov/information-for-data-submitters-payer-data-reporting/>
 - Please contact Maria Joy re: INET registration or issues.
Maria.Joy@State.MA.US
617-701-8378

Next Steps: TAG Calls

- CHIA will hold all-payer TAG calls on the following dates:
 - April 29
 - May 13
 - May 27
- As always, please contact your CHIA TME liaison with questions at any time.

Questions or Comments?

Please call or email your designated CHIA contact with any questions or comments:

Contact	Payers
Ellyn Boukus Ellyn.Boukus@State.MA.US 617-701-8190	Cigna, Fallon, Minuteman Health, Network Health, Tufts (commercial and Medicare Advantage)
James Gorry James.Gorry@State.MA.US 617-701-8362	Aetna , BMC HealthNet, Health New England , Harvard Pilgrim/Health Plans Inc., United (commercial and Medicare Advantage)
Kait O' Brien Kaitlyn.E.O'Brien@State.MA.US 617-701-8228	BCBS, Celticare, Neighborhood Health Plan, MassHealth, UniCare
Caitlin Sullivan, Manager Caitlin.Sullivan2@State.MA.US 617-701-8128	All Payers / INET Registration